

Citation for published version:

Jones, M & Pettitt, P 2014, 'The use of outcome data monitoring in the quality assurance of MI services', UKMi Practice Development Seminar, Birmingham, UK United Kingdom, 12/09/14 - 12/09/14.

Publication date:

2014

Document Version

Publisher's PDF, also known as Version of record

[Link to publication](#)

Publisher Rights

CC BY

University of Bath

Alternative formats

If you require this document in an alternative format, please contact:
openaccess@bath.ac.uk

General rights

Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

Take down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

The use of outcome data monitoring in the quality assurance of MI services

Matthew Jones & Pym Pettitt, Pharmacy Department, Royal United Hospital, Bath

Introduction

- In recent years, the effects of Medicines Information (MI) services on patient outcome have become a focus for research.
- Positive effects of an MI enquiry answering service for healthcare professionals (HCPs) have been demonstrated (1) & small scale projects have found similar benefits for patient helplines (2).
- If patient outcome data could be collected continuously through routine MI quality assurance programmes, they might provide a powerful tool for monitoring the quality & value of an individual MI service.

Healthcare Professional Enquiries

- Two key patient outcome questions (with rating scales) for HCP enquiries were validated in a recent national study (1):

How did the advice from MI affect your patient's care or outcome?

How did the advice from MI affect the safety of your patient's drug therapy?

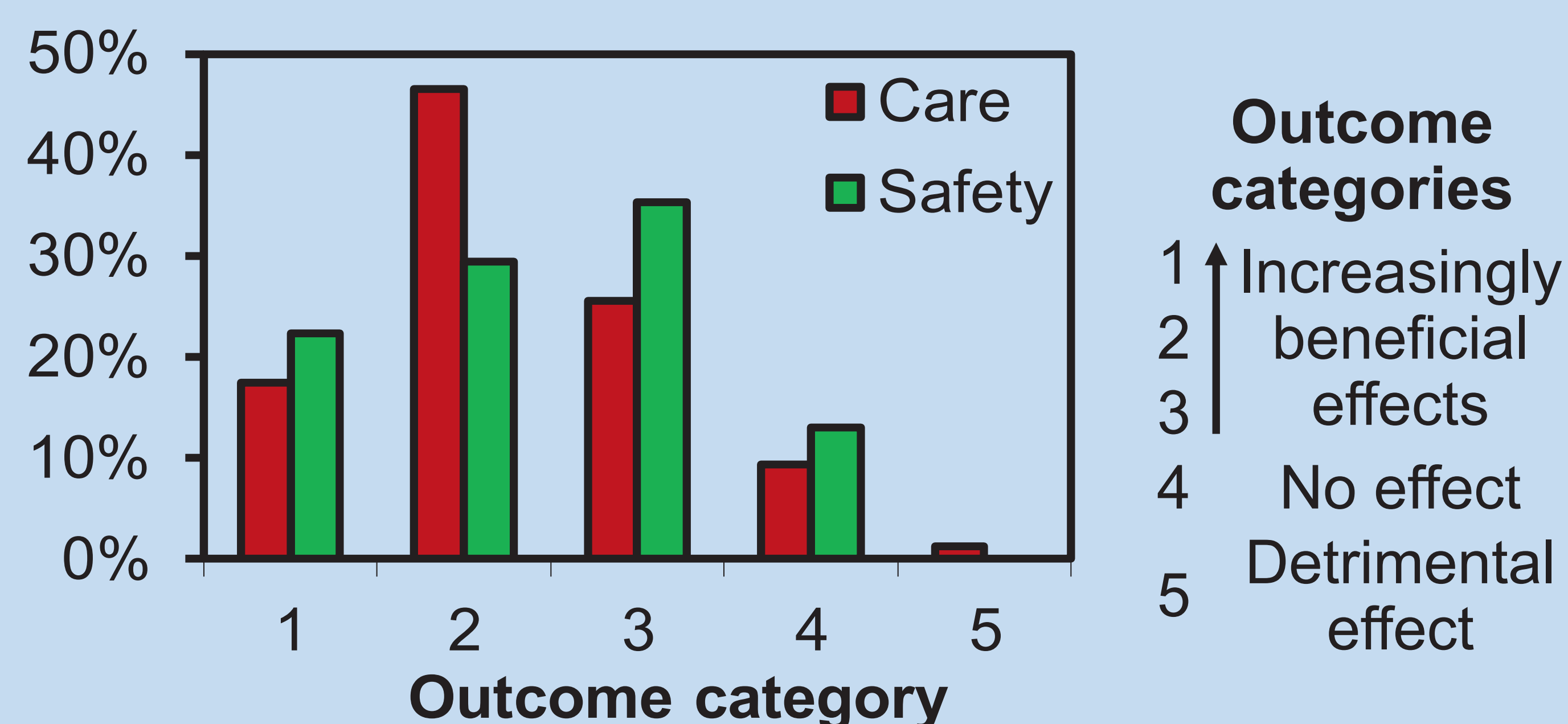
- These questions were added to the standard national user survey. In other regards, the survey remained unchanged.

78% → **68%**

Response rate before & after adding outcome questions

61% Proportion of respondents who answered outcome questions

86 Responses to outcome questions received over the first 2.5 years

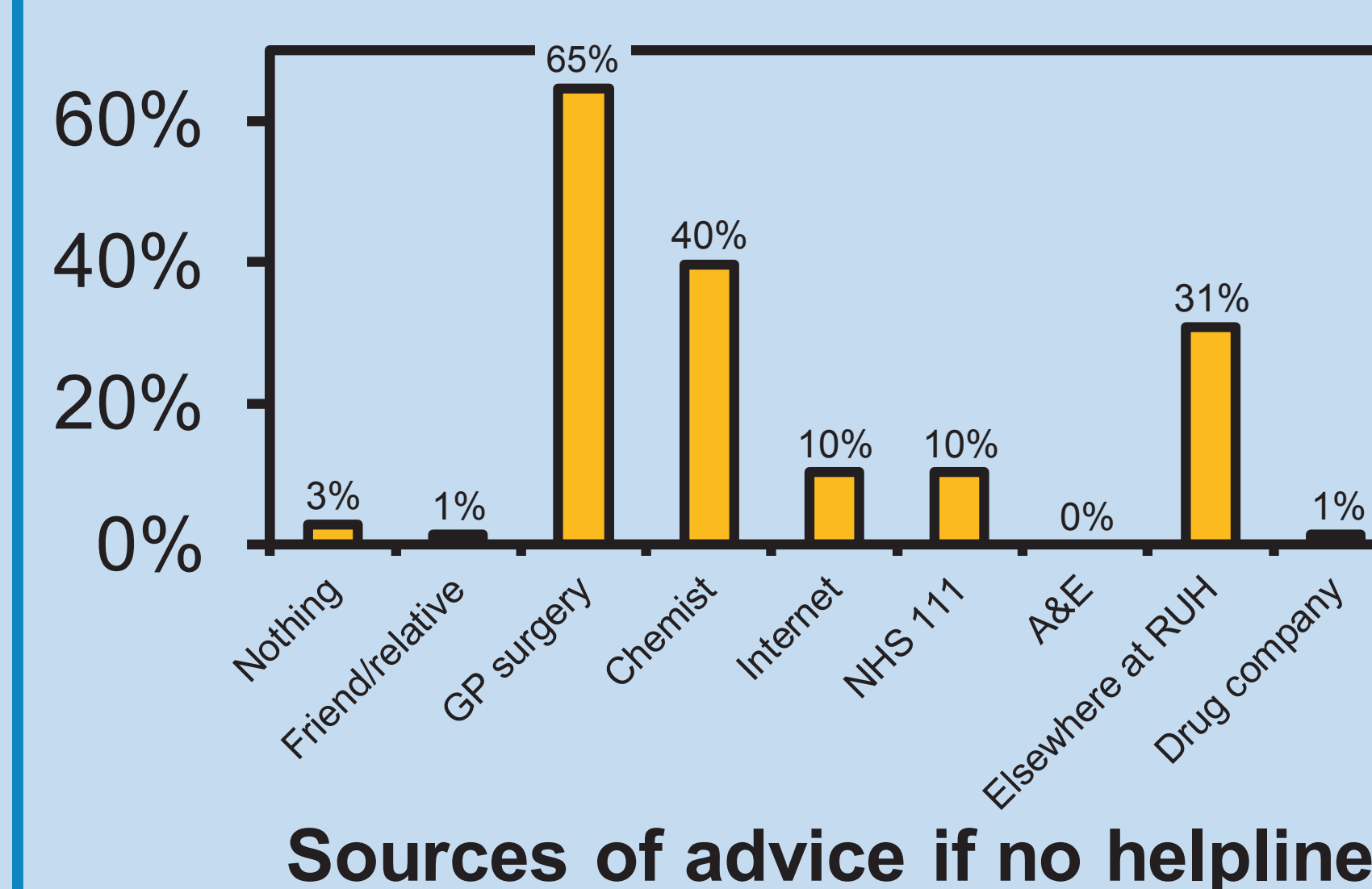
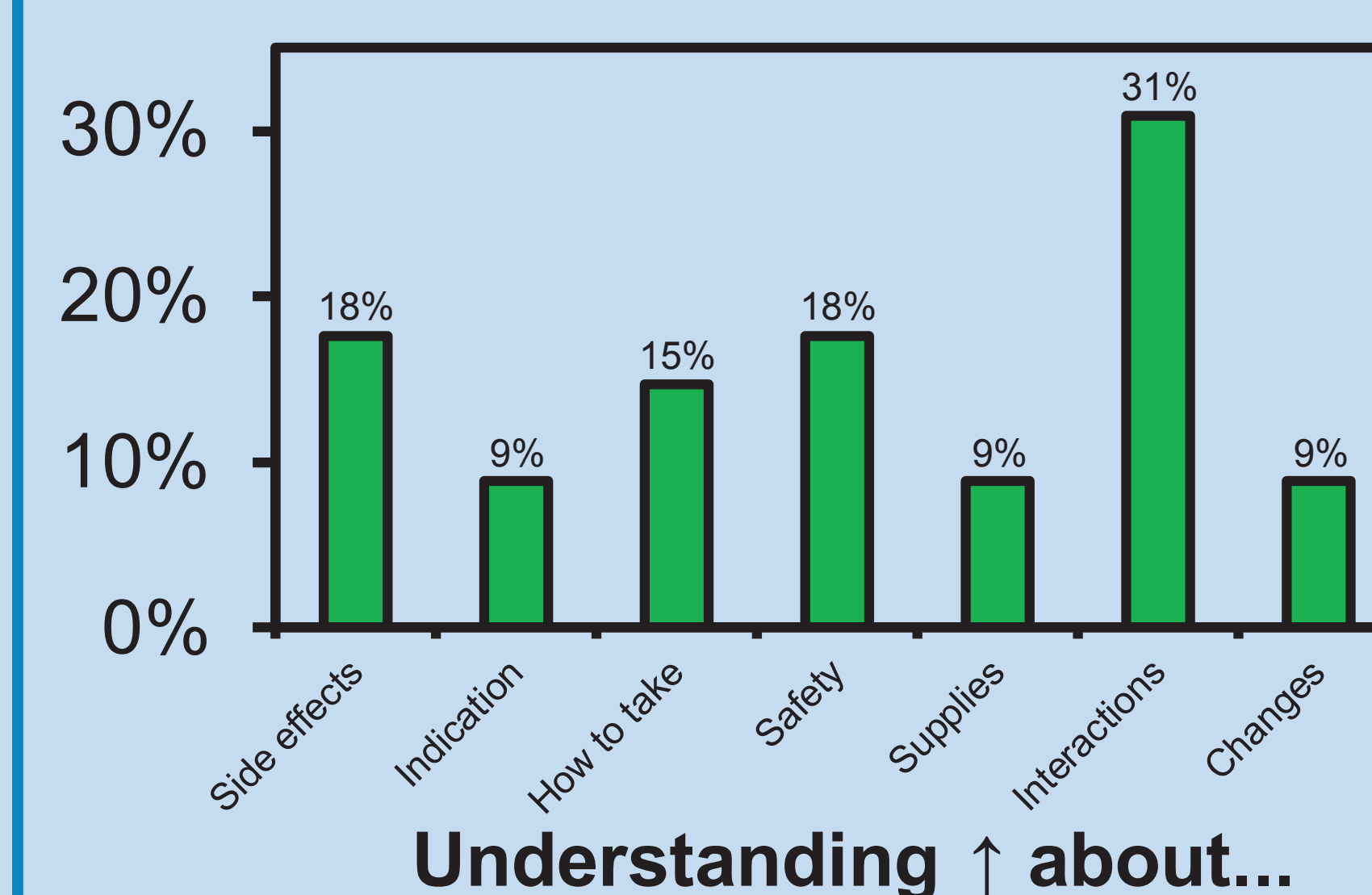
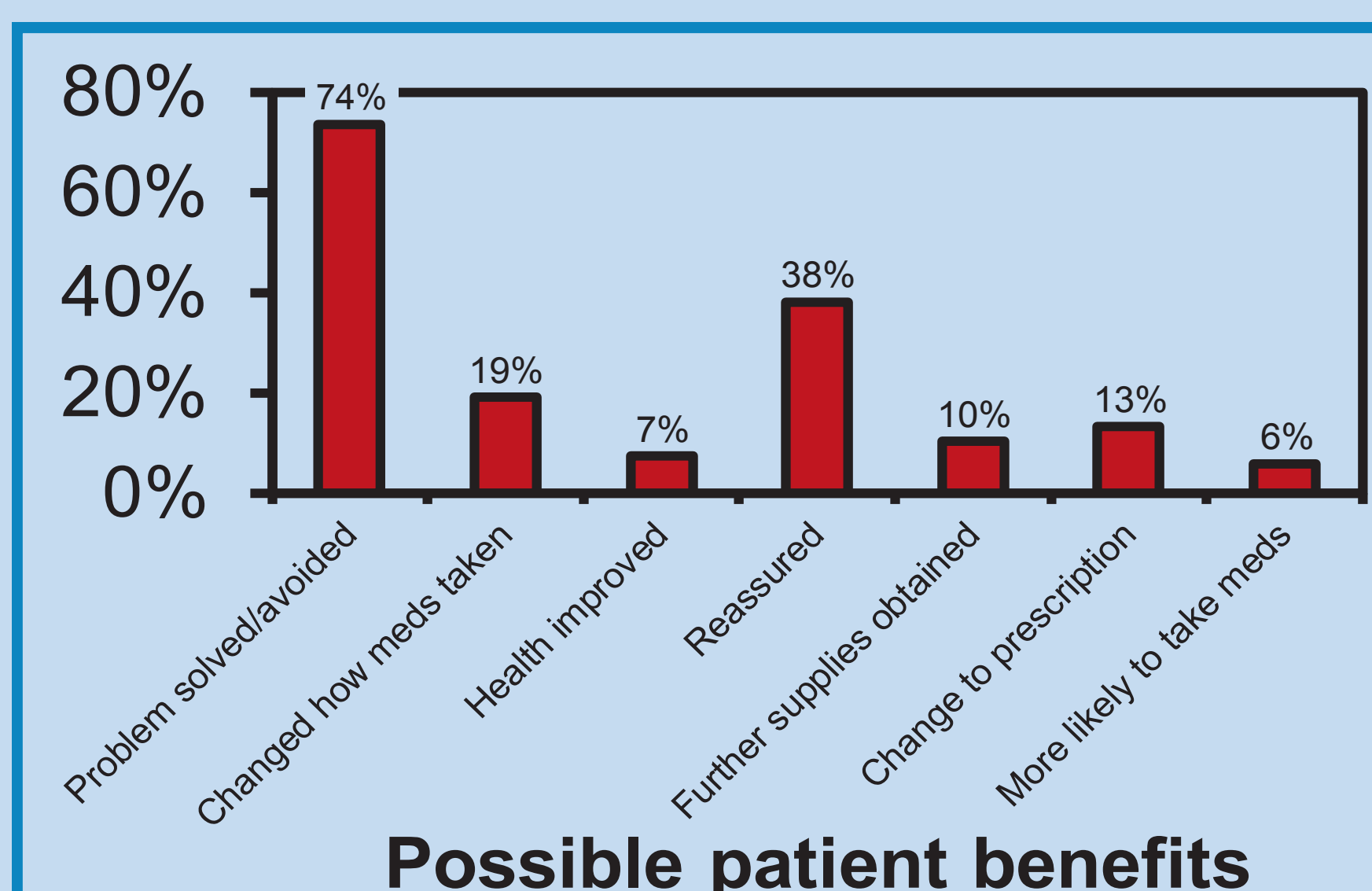


Enquirers' assessment of the overall impact of MI advice on patient care & safety. These figures are comparable with data from the original national study (1).

Patient Helpline

- No validated tool to measure patient outcomes
- A simple survey was devised & distributed by post

49% response rate → **29%** of callers providing feedback over 18 months



100% of respondents stated that they found the advice they received helpful & that they followed it

98% of respondents stated that calling the helpline improved their experience of the hospital

19% Proportion of calls during which a medication error was identified & corrected

Discussion

- Questions regarding patient outcome can be included in regular MI user surveys whilst still achieving good response rates.
- The data obtained can be used to ensure the MI centre in question is working to a high standard & to demonstrate the patient value obtained from the provision of the service.
- HCP enquiry outcome questions are already validated & could be quickly incorporated into the national MI user survey.
- Further work is required to validate patient helpline outcome questions. This should be a high priority for future research.

References

1. Innes, Bramley & Wills, 2014. The impact of UK Medicines Information services on patient care, clinical outcomes & medicines safety: an evaluation of healthcare professionals' opinions. Eur J Hosp Pharm, 21, pp. 222-228.
2. Wills, 2014. Who do discharged patients call if they have medication queries? Clin Pharm, 6, pp. 103-104.